

POSITION: LPN/MEDICATION TECH.

REPORTS TO: GENERAL MANAGER/EXECUTIVE DIRECTOR



JOB SUMMARY

This position requires that you accept the responsibility for the total care of each resident in your Resident Group for all activities of daily living. You will be accountable to monitor the activities and behavior for all residents in your Resident Group so that the services care and treatments of each resident are appropriate and delivered in a continuous, predictable and efficient manner to them.

You must coordinate and communicate with all other team members in maintaining a holistic perspective of service and care for each resident. Also actively engage yourself in reinforcing, introducing and implementing activities that maximize each resident's identity, abilities and interests that are in your Resident Group.

JOB DESCRIPTION

1. Personally get to know all residents in your Resident Group by communicating with other team members and departments, reviewing appropriate resident records, and direct conversation with residents.
2. Set up & administer medications, in the appropriate amounts, at the appropriate times, to the appropriate people; following the established policies & procedures, guidelines, and applicable state laws.
3. Under the direction, and in coordination with the Health Services Director, help supervise and train new staff; orienting them to their job tasks, the residents, and the community.
4. Make best efforts to ensure staff on duty are motivated to devote their best efforts to meet their responsibilities set forth in their respective job descriptions and that they present a professional, courteous and caring demeanor at all times to residents, their families, visitors, as well as to prospective residents.
5. Personally provide adequate supervision to all personnel working in the Assisted Living Department and, as necessary, assist with the direct care of the residents receiving services from the Assisted Living Department.
6. Obtain vital signs and/or monitor residents as needed, to help determine if there is an adverse response to specified types of medications; report and notify the health services director if unexpected reactions occur.
7. Orient each new resident in your Resident Group to their new living environment, to you as an assistant, to other team members, and to all other residents.
8. As directed by your supervisor, re-stock and accurately record resident medication inventory, which may include narcotics.

9. Follow and actively participate in all resident orientation practices and procedures which have been and will continually be developed to ease the disorientation, confusion, and withdrawal, for each new resident. Remain as closely involved as possible in all activities and therapies of your residents to ease their anxiety while they become accustomed to their new and unfamiliar living environment.
10. Explain the amenities, routines and expectations of the community and discuss their unique needs and preferences with them as often as necessary to ease their transition. A successful orientation can take up to 6 weeks to complete.
11. Under the direction of the General Manager, plan, implement, supervise, administer, and document, effective and safe medication and treatment regimens for each resident of the Community under his / her supervision. Work directly and cooperate with outside health care practitioners, consultants, physicians in the coordination of all resident care.
12. Coordinate, implement, and provide and accurately document all components of residents medication administration regimen, and personal care described in the Resident Handbook and Care Plan and all activities of daily living to each resident as required.
13. Continually assess each resident's ability to perform basic daily living (ADL) skills, life management and social skills. Communicate observations and refer potential difficulties or opportunities for resident improvement to the appropriate team members (team leaders, supervisors, and Director).
14. Use care planning meetings to identify and confirm recommended actions that develop and reinforce residents' full potential to live independently and age in place. Work individually on a consistent basis each day with each resident in your Resident Group to expand the number of activities of daily living the resident performs to himself/herself. Encourage and motivate each resident in your Resident Group to do as much for themselves as possible but take time, if necessary to assist when required.
15. Be actively involved in activities that will assist the resident in adapting to their new and changing environment. Create and or follow programs and ideas that will stimulate and maximize the unique interests and attributes for each resident in your Resident Group. All judgment and interaction should be based on an in-depth knowledge of the residents likes, dislikes, beliefs, and interests.
16. Plan your daily work schedule in a way that will maximize time for personal individualized interaction with each resident in your Resident Group. Use the time when providing service to encourage participation in individual and group activities to develop improved future ADL skills.
17. Be informed of the importance of activities and involved in the implementation of activities as frequently as possible. Select, develop and lead on a scheduled or informal basis resident special interest groups that bring together resident with similar interests.

18. Ensure that no resident in you Resident Group is isolated or goes without some type of outside stimulation by providing, if necessary, individualized activities in their room.
19. Record and retrieve from resident notes all pertinent information regarding effective methods used in effecting communication with, motivation of and assistance to each resident in your Resident Group.
20. Request additional guidance, training and support as necessary to make your work with each resident reach their full potential for safe, healthy and meaningful lifestyle and the Community.
21. Participate in all required training, orientation, meetings and programs offered by employer.
22. Promptly discuss and resolve any potential service or care coordination problems with all involved team members and team leaders.
23. Present a professional demeanor that communicates to current and prospective residents the corporate philosophy of service, goodwill, and genuine interest in the resident's unique needs.
24. Conduct yourself and your business always so as not to detract from or reflect adversely on the reputation of the property. Handle all resident concerns and complaints with finesse and in a caring, polite, and professional manner.
25. Communicate and channel to supervisor, all resident, personnel, and other matters and information, which could concern or be in any way beneficial to employer.
26. While on duty, diligently and conscientiously devote your full and exclusive time and attention, your best skills and efforts, to the discharge of your duties.
27. Promote a thorough and continuous understanding among all employees of the importance of the food services department to the quality of life for all residents and prospective residents.
28. Serve as the contact person for family members and/or responsible parties for each resident receiving service under the Assisted Living or related programs. Exercises appropriate professional judgment in assessing and accurately completely and immediately communicating to the General Manager, the resident, and/or his responsible party or significant other changes in the residents' physical or mental condition and makes effective recommendations for action to the General Manager. Accurately, completely, and timely documents all such changes
29. Perform such other tasks as may be required from time to time by the General Manager or Management Company of the property.

MINIMUM REQUIREMENTS

- A continuous and consistent demonstrated interest in and knowledge about the elderly and their needs and the competency to meet those needs on a consistent basis.
- An interest in and willingness to learn and a demonstrated initiative in developing skills in caring for the elderly consistent with the philosophy and policies of the Community. Also must be at least 18 years of age.

EDUCATIONAL/PROFESSIONAL/PERSONAL QUALIFICATIONS:

1. Skin test and/or x-ray for TB.
2. Current licensure to practice nursing as an LPN or Registered Nurse in the state of employment.
3. Bloodborne Pathogens Training
4. Certification in Medication Administration

Must provide and cooperation team player with peers and superiors.

PHYSICAL, SENSORY, AND MENTAL REQUIREMENTS

Primary Physical Requirements:

1. Lift up to 10 lbs: Frequently required to lift medical charts, supplies, and residents' personal items, i.e. clothing and food items.
2. Lift 11 to 25 lbs: Frequently may be required when lifting soiled bed linens.
3. Lift 26 to 50 lbs: Frequently required when assisting and ambulatory resident in bathing or dressing.
4. Lift over 50 lbs: Frequently required when transferring a non-ambulatory resident weighing between 100 and 160 pounds. Two aids are typically utilized when resident is usually heavy or combative.
5. Carry up to 10 lbs: Occasionally required to lift medical charts, supplies, and residents' personal items i.e., clothing and food items.
6. Carry 11 to 25 lbs: Frequently may be required when lifting soiled bed linens and carrying to the laundry area and carrying clean linen to the room.
7. Carry 26 to 50 lbs: Occasionally to frequently required when assisting an ambulatory resident in bathing or dressing.

8. Carry over 50 lbs: Occasionally to frequently required when transferring a non-ambulatory resident weighing between 100 and 160 pounds. Two aids are typically utilized when resident is usually heavy or combative.
9. Reach above shoulder height: Occasionally occurs when reaching for medical records, supplies, and linens located on shelves.
10. Reach at shoulder height: Frequently may occur when assisting in eating, when changing bed linens, when taking vital signs, and when assisting in grooming.
11. Reach below shoulder height: Occasionally occurs while assisting residents with peri-care, bathing, wheelchair positioning and catheter placement.
12. Push/Pull: Frequently required to push a laundry cart or food cart or resident in wheelchair; which rolls easily across tile or carpeted floor.

Hand Manipulation:

1. Grasping: Frequently grasping while transferring resident.
2. Handling: Constantly handling residents' personal items, blood pressure gauge, thermometer, other equipment noted and eating utensils.
3. Torquing: Not required.
4. Fingering: Occasionally occurs while documenting residents' medical charts.
5. Control and Equipment: Blood pressure gauge, thermometer, etc, as noted.

Other Physical Considerations:

1. Twisting: Occasionally may occur while transferring resident.
2. Bending: Frequently occurs while taking vital signs, assisting residents in bathing, providing peri-care, making beds, etc.
3. Squatting: Occasionally may occur while bathing resident: also required when putting on shoes and socks of residents, when adjusting resident in a wheelchair; when adjusting the bed and also when making eye-to-eye contact while talking if resident is in a wheelchair.
4. Kneeling: Occasionally may occur while bathing resident.
5. Crouching: Required when putting on shoes and socks of residents, and also when making eye-to-eye contact while talking if resident is in a wheelchair.

- 6. Climbing: Not required.
- 7. Balancing: Not required.

During a typical 8-hour day, employee is required to:

	<u>Total Hours</u>
Sit	1
Stand	3
Walk	4

Work surface:

Varies from carpeting, linoleum, wood, and tile. When seated, typically an office-type chair.

COGNITIVE AND SENSORY REQUIREMENTS

- 1. Talking: Necessary for communicating with residents and other aids. Must be able to speak English fluently.
- 2. Hearing: Necessary for taking instructions from charge nurse and request of residents and taking blood pressure. Must be able to understand English fluently
- 3. Sight: Necessary for doing job correctly and effectively. Must be able to write and read English fluently.
- 4. Tasting and Smelling: Smelling is required for accurate maintenance and detection of wounds, urinary tract problems, etc.

SUMMARY OF OCCUPATIONAL EXPOSURES

Bloodborne Pathogens:

Tasks and procedures performed by employee involve risks classified by CDC as:

- 1. Category I (Direct contact with blood or other bodily fluids to which universal precautions apply).
- 2. Category II (Activity performed without blood exposure but exposure may occur in emergency).
- 3. Category III (Task/activity does not entail predictable or unpredictable exposure to blood).

OTHER CONSIDERATIONS AND REQUIREMENTS

In this position, the employee is required to be on his or her feet continually throughout the day. In a full-time nonrestrictive basis, the employee must be able to lift at least 50 pounds of weight, which is required when transferring a resident from a bed to a wheelchair. A transfer belt is necessary and required when transferring any resident. This is for the safety of not only the resident, but also the employee. Other employees are available to assist with heavier residents if needed. For residents with care plans that call for it and are approved by management, the use of a Hoyer Lift may be required.

WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodation may be made to enable individuals with disabilities to perform the essential functions.

The noise level in the work environment is usually quiet with occasional periods of moderate noise.

All staff members are subject to a criminal background check.

All staff members will complete Abuse Training.

All staff members must complete Health screening including TB testing prior to their hire.